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## **TRANSMITTAL FORM**

*(to be used for all correspondence after initial filing)*

<b>TRANSMITTAL FORM</b>		Application No.	09/752,396
		Filing Date	December 28, 2000
		First Named Inventor	Cheon-Soo Kim
		Group Art Unit	2811
		Examiner Name	Ori Nadav
Total Number of Pages in This Submission	5	Attorney Docket Number	51876P231

### **ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):	<input type="checkbox"/> 4 cited references; Request for priority t/w certified copy of Korean application	

Remarks

JUN 17 2002  
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### **SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Eric S. Hyman, Reg. No. 30,139  BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	5/31/02

### **CERTIFICATE OF MAILING/TRANSMISSION**

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on:

Typed or printed name	Lynda Shapiro	Date	5/31/02
Signature			

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**FEE TRANSMITTAL  
for FY 2002**

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT	(\\$)	0.00
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Complete if Known	
Application Number	09/752,396
Filing Date	December 28, 2000
First Named Inventor	Cheon-Soo Kim
Examiner Name	Ori Nadav
Group/Art Unit	2811
Attorney Docket No.	51876P231

**METHOD OF PAYMENT (check one)**

Check     Credit card     Money Order     Other     None  
 Deposit Account

Deposit Account Number

Deposit Account Name

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below     Credit any overpayments  
 Charge any additional fee(s) during the pendency of the application  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

**FEE CALCULATION**

**1. BASIC FILING FEE**

Large Entity		Small Entity		FeePaid
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
101	740	201	370	Utility filing fee
106	330	206	165	Design filing fee
107	510	207	255	Plant filing fee
108	740	208	370	Reissue filing fee
114	160	214	80	Provisional filing fee
SUBTOTAL (1)		(\$)		

**2. EXTRA CLAIM FEES**

Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	FeePaid
4	1	-	20** = 0	x 18.00 = \$0.00	
			3** = 0	x 84.00 = \$0.00	

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	260	204	140	Multiple Dependent claim, if not paid
109	84	209	42	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		(\$)		0.00

\*or number previously paid, if greater. For Reissues, see below

**3. ADDITIONAL FEES**

Large Entity	Fee Code	Fee (\$)	Small Entity	Fee Code	Fee (\$)	Fee Description	FeePaid
105	130	205	65	Surcharge - late filing fee or oath			
127	50	227	25	Surcharge - late provisional filing fee or cover sheet			
139	130	139	130	Non-English specification			
147	2,520	147	2,520	For filing a request for ex parte reexamination			
112	920 *	112	920 *	Requesting publication of SIR prior to Examiner action			
113	1,840 *	113	1,840 *	Requesting publication of SIR after Examiner action			
115	110	215	55	Extension for reply within first month			
116	400	216	200	Extension for reply within second month			
117	920	217	460	Extension for reply within third month			
118	1,440	218	720	Extension for reply within fourth month			
128	1,960	228	980	Extension for reply within fifth month			
119	320	219	160	Notice of Appeal			
120	320	220	160	Filing a brief in support of an appeal			
121	280	221	140	Request for oral hearing			
138	1,510	138	1,510	Petition to institute a public use proceeding			
140	110	240	55	Petition to revive - unavoidable			
141	1,280	241	640	Petition to revive - unintentional			
142	1,280	242	640	Utility issue fee (or reissue)			
143	460	243	230	Design issue fee			
144	620	244	310	Plant issue fee			
122	130	122	130	Petitions to the Commissioner			
123	50	123	50	Processing fee under 37 CFR 1.17(q)			
126	180	126	180	Submission of Information Disclosure Stmt			
581	40	581	40	Recording each patent assignment per property (times number of properties)			
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))			
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))			
179	740	279	370	Request for Continued Examination (RCE)			
169	900	169	900	Request for expedited examination of a design application			
Other fee (specify)							

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)

**SUBMITTED BY**

Name (Print/Type)	Eric S. Hyman	Registration No. (Attorney/Agent)	30,139	Telephone	(310) 207-3800
Signature				Date	5/13/02

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